BEST AVAILABLE COPY

Application or Docket Number

	PATENT A	ORD	/	2169	5 <i>8</i>	-/O	<i>ပ</i> ပ						
	CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			.30					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BA	ASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			30 minus 20=		* 10			X\$ 9= 9		OR	X\$18=		
INDEPENDENT CLAIMS			3 minus 3 =		0			X40=	O.	OR	X80=		
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2							T	TOTAL 445		OR	TOTAL		
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							MALL	ENTITY	OR	OTHER SMALL E		
AMENDMENT &		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	37	Minus	** 2	30	= 5] [;	X\$ 9=	45	OR	X\$18=		
	Independent -	NTATION OF MI	Minus	***	<u>ろ</u>	=]		X4 8 =	42	OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							⊦135=		OR	+270=		
							ADI	TOTAL DIT. FEE	pa	О R	TOTAL ADDIT. FEE		
		(Column 1)		(Colur		(Column 3)							
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=] ;	X\$ 9=		OR	X\$18=		
	Independent	* NTATION OF MU	Minus	***	CLAIM	=		X40=		OR	X80=		
	FIRST FRESE	NIATION OF INC	DETIFIE DEF	CINDEINI	CLAIN		┙┌	⊦135=		OR	+270=		
							L	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colur	mn 2)	(Column 3)		DIT. PEL			ADDIT. I CE		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=] [;	X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***]=	┧┟	X40=		OR	X80=	<u> </u>	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		UH			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+270=		
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		ber Previously Pa					er found	in the ac	propriate bo	x in co	lumn 1.		